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Illinois Department of Public Health (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: \_\_\_\_\_ C B. WING IL6015333 10/11/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 8200 WEST ROOSEVELT ROAD APERION CARE FOREST PARK FOREST PARK, IL 60130 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID ID (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) DATE CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S 000 Initial Comments S 000 Complaint Investigation: 1996843 / IL00115807 S9999 Final Observations S9999 Statement of Licensure Violations: 300.1210 b) 300.1210 d) 6) Section 300.1210 General Requirements for Nursing and Personal Care The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate **Attachment A** supervision and assistance to prevent accidents. Statement of Licensure Violations These regulations were not met as evidenced by: Based on observations, interviews, and record reviews, the facility allowed use of bedrails

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Electronically Signed

TITLE

(X6) DATE

10/29/19

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left side and fall from bed. Further hospital records, denote closed fracture of one rib, sixth, on left side and post traumatic minimally displaced posterior left sixth rib fracture.

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hanging from the side rails."

the side rail and "most of his body was being supported by the side rail." R1 was sliding out of the bed from the opening at the head of the bed, and the top of the left side rail. R1 complained of headache and back pain, so he was sent to the hospital for an evaluation. V4 said R1 returned from his evaluation the same shift and the hospital said, "he had a fractured rib from

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against gravity he only shows muscle twitching. R1's right arm is stronger than his left, but he can't move his arms in an upward motion or lift them. R1 has limited range of motion in his hands and fingers. He might be able to grab the rail with his right hand. R1 is unable to move his left leg

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adjustable metal or rigid plastic bars that attach to the bed. They are available in a variety of types,

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